

17 MAR 2006

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

APPLICANT(S),

FILING DATE

10/560324

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1				
3		2		1		
4		0				
5	1		1			
6		1				
7		2				
8		2				
9		0				
10	1		1			
11		1				
12		1				
13		2				
14	1		1			
15		1				
16		1				
17		1				
18	1		1			
19		1				
20		2		4		
21		2				
22		1				
23		0				
24		2				
25		2				
26	1		1			
27		1				
28		2				
29		2				
30		2				
31	1		1			
32		1				
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49						
50						
TOTAL IND.	7	↓	7	↓		↓
TOTAL DEP.	30	←	5	←		←
TOTAL CLAIMS	43		12			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						